

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MA	70591	1/3
O.I.P.E. CLASSIFIER		01	2/14/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
—	(Through numeral).....	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim		Date
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Claim		Date	
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Claim		Date
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**If more than 150 claims or 10 actions
staple additional sheet here**

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